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SLIP STAPLE AREA (Do not place references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	BD	57	3-12-98
FORMALITY REVIEW	JB	85079	5/13/98

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here